

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**

SERIAL NO. **10663257**  
APPLICANT(S)

FILING DATE **9-16-03**

CLAIMS						
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
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18	1					
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44		1				
45		1				
46		1				
47		1				
48		1				
49	1					
50		1				
TOTAL IND.	4					
TOTAL DEP.	38					
TOTAL CLAIMS	42					

  

51		1			
52		1			
53		1			
54		1			
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58		1			
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TOTAL DEP.					
TOTAL CLAIMS					